

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Independence USA PAC

ADDRESS (number and street)

PO Box 1510

Check if different
than previously
reported. (ACC)

New York

NY

10150

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00532705

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☐ July 15
Quarterly Report (Q2)
- ☐ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☒ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M / D D / Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M / D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y Y Y
08 01 2016

through

M M / D D / Y Y Y Y Y Y
08 31 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Wolfson, Howard, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Wolfson, Howard, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
06 23 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Independence USA PAC

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 08 / 01 / 2016

To:

 M M / D D / Y Y Y Y Y
 08 / 31 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2016		238808.70
(b) Cash on Hand at Beginning of Reporting Period.....	4073122.77	
(c) Total Receipts (from Line 19)	8525500.00	13759612.90
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	12598622.77	13998421.60
7. Total Disbursements (from Line 31).....	6926590.44	8326389.27
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	5672032.33	5672032.33
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	519310.46	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Independence USA PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
08	/	01	/	2016

To:

M M	/	D D	/	Y Y Y Y
08	/	31	/	2016

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

8525500.00

13749491.29

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

8525500.00

13749491.29

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

548.11

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

8525500.00

13750039.40

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

9573.50

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))

8525500.00

13759612.90

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

8525500.00

13759612.90

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	2934033.82	3317832.65
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2934033.82	3317832.65
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	3987056.62	5003056.62
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	5500.00	5500.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	6926590.44	8326389.27
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6926590.44	8326389.27

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	8525500.00	13750039.40
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8525500.00	13750039.40
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2934033.82	3317832.65
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	9573.50
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2934033.82	3308259.15

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Independence USA PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bloomberg, Michael, R., ,

Mailing Address 909 Third Avenue

City
New York

State
NY

Zip Code
10022

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Bloomberg LP

Occupation (for Individual)

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5249491.29

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 03 / 2016

Transaction ID : SA11AI.5630

Amount of Each Receipt this Period

25500.00

☐ Memo Item

In-kind - Polling (See corresponding entry on Schedule E)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bloomberg, Michael, R., ,

Mailing Address 909 Third Avenue

City
New York

State
NY

Zip Code
10022

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Bloomberg LP

Occupation (for Individual)

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

13749491.29

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2016

Transaction ID : SA11AI.5244

Amount of Each Receipt this Period

8500000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

8525500.00

TOTAL This Period (last page this line number only).....▶

8525500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Independence USA PAC

Full Name (Last, First, Middle Initial)

A. Bank of AmericaMailing Address 114 W. 47th St.
6th FloorCity
New YorkState
NYZip Code
10036Purpose of Disbursement
Bank Fee

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	5			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5254

Amount of Each Disbursement this Period

246.58

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Connections Media LLCMailing Address 1428 U Street NW
3rd FloorCity
WashingtonState
DCZip Code
20009Purpose of Disbursement
Website services

004

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	3			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5248

Amount of Each Disbursement this Period

8995.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Geller & Co.

Mailing Address 909 Third Avenue

City
New YorkState
NYZip Code
10022Purpose of Disbursement
Financial advisory services

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	2			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5252

Amount of Each Disbursement this Period

1277.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

10518.58

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Independence USA PAC

Full Name (Last, First, Middle Initial)

A. Geller & Co.

Mailing Address 909 Third Avenue

City
New YorkState
NYZip Code
10022Purpose of Disbursement
Financial advisory services

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	2			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5253

Amount of Each Disbursement this Period

1541.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Geller & Co.

Mailing Address 909 Third Avenue

City
New YorkState
NYZip Code
10022Purpose of Disbursement
Financial advisory services

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	3			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5255

Amount of Each Disbursement this Period

2046.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JBCconnect CA LLCMailing Address 108 W. 39th Street
7th FloorCity
New YorkState
NYZip Code
10018Purpose of Disbursement
Logo design services

004

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	0			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5250

Amount of Each Disbursement this Period

693.75

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

4280.75

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Independence USA PAC

Full Name (Last, First, Middle Initial)

A. Revolution Media Group LLC

Mailing Address 1020 Princess Street

City
Alexandria

State
VA

Zip Code
22314

Purpose of Disbursement
Production cost for future communications

004

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 12 / 2016

FEC Identification Number

C

Transaction ID : SB21B.5251

Amount of Each Disbursement this Period

760.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Revolution Media Group LLC

Mailing Address 1020 Princess Street

City
Alexandria

State
VA

Zip Code
22314

Purpose of Disbursement
Media consulting

004

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 12 / 2016

FEC Identification Number

C

Transaction ID : SB21B.5287

Amount of Each Disbursement this Period

13180.58

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Revolution Media Group LLC

Mailing Address 1020 Princess Street

City
Alexandria

State
VA

Zip Code
22314

Purpose of Disbursement
Media consulting

004

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 12 / 2016

FEC Identification Number

C

Transaction ID : SB21B.5288

Amount of Each Disbursement this Period

3750.68

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

17691.26

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Independence USA PAC

Full Name (Last, First, Middle Initial)

A. Revolution Media Group LLC

Mailing Address 1020 Princess Street

City
AlexandriaState
VAZip Code
22314

Purpose of Disbursement

Payment for media buy disseminated in September (see amended 48-hour
reports filed September 14)

Candidate Name

TOOMEY, PATRICK JOSEPH, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2016

☐ Primary☒ General☐ Other (specify) ▼

State: PA

District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8				2	9					2	0	1

FEC Identification Number

C S4PA00121

Transaction ID : SB21B.5312

Amount of Each Disbursement this Period

2841727.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Revolution Media Group LLC

Mailing Address 1020 Princess Street

City
AlexandriaState
VAZip Code
22314

Purpose of Disbursement

Production cost for future communications

Candidate Name

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify)

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8					3					2	0	1

FEC Identification Number

C

Transaction ID : SB21B.5298

Amount of Each Disbursement this Period

23878.58

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SKDKnickerbockerMailing Address 1150 18th Street NW
Suite 800City
WashingtonState
DCZip Code
20036

Purpose of Disbursement

Media Consulting

Candidate Name

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8					2					2	0	1

FEC Identification Number

C

Transaction ID : SB21B.5290

Amount of Each Disbursement this Period

17514.65

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

2883120.23

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Independence USA PAC

Full Name (Last, First, Middle Initial)

A. Venable LLP

Mailing Address 600 Massachusetts Avenue, NW

City
WashingtonState
DCZip Code
20001Purpose of Disbursement
Legal Fees

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	3			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5249

Amount of Each Disbursement this Period

10235.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Venable LLP

Mailing Address 600 Massachusetts Avenue, NW

City
WashingtonState
DCZip Code
20001Purpose of Disbursement
Legal Fees

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5256

Amount of Each Disbursement this Period

8188.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

18423.00

TOTAL This Period (last page this line number only)..... ►

2934033.82

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 32

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Independence USA PAC

Full Name (Last, First, Middle Initial)

A. SKDKnickerbockerMailing Address 1150 18th Street NW
Suite 800City
WashingtonState
DCZip Code
20036Purpose of Disbursement
Media consulting

004

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	9			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.5304

Amount of Each Disbursement this Period

5500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5500.00

5500.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 13 OF 32

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
Independence USA PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Connections Media LLCNature of Debt (Purpose):
Website servicesMailing Address 1428 U Street NW
3rd FloorCity
WashingtonState
DCZip Code
20009

Outstanding Balance Beginning This Period

8995.00

Transaction ID : SD10.5103

Amount Incurred This Period

0.00

Payment This Period

8995.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Connections Media LLCNature of Debt (Purpose):
Website servicesMailing Address 1428 U Street NW
3rd FloorCity
WashingtonState
DCZip Code
20009

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.5265

Amount Incurred This Period

6855.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6855.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Douglas E. Schoen NYC LLCNature of Debt (Purpose):
Polling

Mailing Address 1111 Park Avenue

City
New YorkState
NYZip Code
10128

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.5276

Amount Incurred This Period

108250.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

108250.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

115105.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 14 OF 32

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Independence USA PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Douglas E. Schoen NYC LLC

Nature of Debt (Purpose):
Polling

Mailing Address 1111 Park Avenue

City

New York

State

NY

Zip Code

10128

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.5277

Amount Incurred This Period

182500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

182500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Geller & Co.

Nature of Debt (Purpose):
Financial advisory services

Mailing Address 909 Third Avenue

City

New York

State

NY

Zip Code

10022

Outstanding Balance Beginning This Period

1541.00

Transaction ID : SD10.5101

Amount Incurred This Period

0.00

Payment This Period

1541.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Geller & Co.

Nature of Debt (Purpose):
Financial advisory services

Mailing Address 909 Third Avenue

City

New York

State

NY

Zip Code

10022

Outstanding Balance Beginning This Period

1277.00

Transaction ID : SD10.5102

Amount Incurred This Period

0.00

Payment This Period

1277.00

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional)..... ►

182500.00

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 15 OF 32

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
Independence USA PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

JBCconnect CA LLCNature of Debt (Purpose):
Logo design servicesMailing Address 108 W. 39th Street
7th FloorCity
New YorkState
NYZip Code
10018

Outstanding Balance Beginning This Period

693.75

Transaction ID : SD10.5027

Amount Incurred This Period

0.00

Payment This Period

693.75

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Marathon Strategies LLCNature of Debt (Purpose):
Consultant - ResearchMailing Address 38 East 29th Street
Fourth FloorCity
New YorkState
NYZip Code
10016

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.5263

Amount Incurred This Period

30000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

30000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Marathon Strategies LLCNature of Debt (Purpose):
Consultant - ResearchMailing Address 38 East 29th Street
Fourth FloorCity
New YorkState
NYZip Code
10016

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.5279

Amount Incurred This Period

30000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

30000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

60000.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 16 OF 32

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
Independence USA PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Revolution Media Group LLC

Nature of Debt (Purpose):

Television and digital advertisement production
- 'Newtown'

Mailing Address 1020 Princess Street

City

Alexandria

State

VA

Zip Code

22314

Outstanding Balance Beginning This Period

23565.61

Transaction ID : SD10.5106

Amount Incurred This Period

0.00

Payment This Period

23565.61

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Revolution Media Group LLC

Nature of Debt (Purpose):

Media Consulting

Mailing Address 1020 Princess Street

City

Alexandria

State

VA

Zip Code

22314

Outstanding Balance Beginning This Period

3750.68

Transaction ID : SD10.5112

Amount Incurred This Period

0.00

Payment This Period

3750.68

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Revolution Media Group LLC

Nature of Debt (Purpose):

Television and digital advertisement production
- 'Guns Internet'

Mailing Address 1020 Princess Street

City

Alexandria

State

VA

Zip Code

22314

Outstanding Balance Beginning This Period

3005.70

Transaction ID : SD10.5107

Amount Incurred This Period

0.00

Payment This Period

3005.70

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

0.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 17 OF 32

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
Independence USA PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Revolution Media Group LLC

Nature of Debt (Purpose):

Production cost for future communications

Mailing Address 1020 Princess Street

City

Alexandria

State

VA

Zip Code

22314

Outstanding Balance Beginning This Period

760.00

Transaction ID : SD10.5105

Amount Incurred This Period

0.00

Payment This Period

760.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Revolution Media Group LLC

Nature of Debt (Purpose):

Media consulting

Mailing Address 1020 Princess Street

City

Alexandria

State

VA

Zip Code

22314

Outstanding Balance Beginning This Period

13180.58

Transaction ID : SD10.5108

Amount Incurred This Period

0.00

Payment This Period

13180.58

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Revolution Media Group LLC

Nature of Debt (Purpose):

Media consulting

Mailing Address 1020 Princess Street

City

Alexandria

State

VA

Zip Code

22314

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.5325

Amount Incurred This Period

4674.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4674.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

4674.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 18 OF 32

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
Independence USA PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Revolution Media Group LLC

Nature of Debt (Purpose):

Television advertisement production -
'Newtown'

Mailing Address 1020 Princess Street

City

Alexandria

State

VA

Zip Code

22314

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.5326

Amount Incurred This Period

9646.21

Payment This Period

0.00

Outstanding Balance at Close of This Period

9646.21

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Revolution Media Group LLC

Nature of Debt (Purpose):

Digital advertisement production - 'Guns
Internet' and 'Newtown'

Mailing Address 1020 Princess Street

City

Alexandria

State

VA

Zip Code

22314

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.5327

Amount Incurred This Period

220.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

220.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Revolution Media Group LLC

Nature of Debt (Purpose):

Media consulting

Mailing Address 1020 Princess Street

City

Alexandria

State

VA

Zip Code

22314

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.5328

Amount Incurred This Period

2461.75

Payment This Period

0.00

Outstanding Balance at Close of This Period

2461.75

1) **SUBTOTALS** This Period This Page (optional)..... ►

12327.96

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 19 OF 32

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
Independence USA PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Revolution Media Group LLC

Nature of Debt (Purpose):
Media consulting

Mailing Address 1020 Princess Street

City
AlexandriaState
VAZip Code
22314

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.5329

Amount Incurred This Period

15000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Revolution Media Group LLC

Nature of Debt (Purpose):
Media consulting

Mailing Address 1020 Princess Street

City
AlexandriaState
VAZip Code
22314

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.5330

Amount Incurred This Period

60000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

60000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

SKDKnickerbocker

Nature of Debt (Purpose):
Television media buy - See August 24 48-hour
reportMailing Address 1150 18th Street NW
Suite 800City
WashingtonState
DCZip Code
20036

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.5366

Amount Incurred This Period

69703.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

69703.50

1) SUBTOTALS This Period This Page (optional)..... ►

144703.50

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 20 OF 32

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
Independence USA PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Venable LLP

Nature of Debt (Purpose):
Legal fees

Mailing Address 600 Massachusetts Avenue, NW

City
WashingtonState
DCZip Code
20001

Outstanding Balance Beginning This Period

10235.00

Transaction ID : SD10.5104

Amount Incurred This Period

0.00

Payment This Period

10235.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ►

0.00

2) TOTALS This Period (last page this line number only)..... ►

519310.46

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

519310.46

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 21 OF 32
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Independence USA PAC	FEC IDENTIFICATION NUMBER ▼ C C00532705
--	---

 Check if ☐ 24-hour report ☐ 48-hour report ☒ New report Amends report filed on / /

Full Name of Payee Bloomberg, Michael, R., ,			<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 909 Third Avenue				Amount <input type="text"/>	
City New York	State NY	Zip Code 10022		Transaction ID : SE.5608	
Purpose of Expenditure In-kind - see amended July report			Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>	
Name of Federal Candidate: TOOMEY, PATRICK JOSEPH, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <input type="text"/> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <input type="text"/>	
Calendar Year-To-Date Per Election for Office Sought			<input type="text"/>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Bloomberg, Michael, R., ,			<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 909 Third Avenue				Amount <input type="text"/>	
City New York	State NY	Zip Code 10022		Transaction ID : SE.5632	
Purpose of Expenditure In-kind - Polling			Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>	
Name of Federal Candidate: TOOMEY, PATRICK JOSEPH, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <input type="text"/> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <input type="text"/>	
Calendar Year-To-Date Per Election for Office Sought			<input type="text"/>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Wolfson, Howard, , ,

[Electronically Filed]

Date

 / /

Signature

: 97 'A -G7 9 @ @ B9 CI G' H9 LH' F9 @ H98 'HC '5 'F9 DCFH ZG7 <98 I @ 'CF 'H9 A -N5 HCB
.

Form/Schedule: SE

Transaction ID : SE.5608

This independent expenditure was previously reported twice: first on an August 25, 2016, amended 48-hour report and then on an amended July monthly report. Both reports included a disbursement date of June 6, 2016. Pursuant to guidance from the FEC's Reports Analysis Division, this amended September monthly report omits the June 6 date of disbursement so that the transaction appears on the Schedule E relevant to August 2016 activity.

Form/Schedule:

Transaction ID:

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 23 OF 32
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Independence USA PAC			FEC IDENTIFICATION NUMBER ▼ C C00532705	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Revolution Media Group LLC <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 12 / 2016	
Mailing Address 1020 Princess Street			Amount 22000.00	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.5609 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Purpose of Expenditure Television and digital advertisement production - 'Newtown'		Category/ Type 004		
Name of Federal Candidate: TOOMEY, PATRICK JOSEPH, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought 0.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Revolution Media Group LLC <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 22 / 2016	
Mailing Address 1020 Princess Street			Amount 1500000.00	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.5191 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 10 / 2016	
Purpose of Expenditure Television and digital media buy		Category/ Type 004		
Name of Federal Candidate: TOOMEY, PATRICK JOSEPH, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought 2541500.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			1500000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <i>Wolfson, Howard, , ,</i>			Date M M / D D / Y Y Y Y Y Y 06 / 23 / 2017	
[Electronically Filed]				

: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB
.

Form/Schedule: SE
Transaction ID : SE.5609

This independent expenditure was previously reported twice: first on an August 25, 2016, amended 48-hour report and again on Schedule B on an Amended July Monthly Report as an expenditure for 'media consulting for future communication.' Both reports included a disbursement date of June 30, 2016.

Form/Schedule:
Transaction ID:

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 25 OF 32
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Independence USA PAC		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00532705</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div>	
Full Name of Payee Revolution Media Group LLC <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div> 08 / 12 / 2016	
Mailing Address 1020 Princess Street		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">3005.70</div>	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.5297 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div> 08 / 10 / 2016
Purpose of Expenditure Television and digital advertisement production - 'Guns Internet'		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: TOOMEY, PATRICK JOSEPH, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: PA	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">2544505.70</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Revolution Media Group LLC <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div> 08 / 03 / 2016	
Mailing Address 1020 Princess Street		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">4988.00</div>	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.5316 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div> 08 / 10 / 2016
Purpose of Expenditure Digital advertisement production - 'Guns Internet' (see amended 48-hour report filed August 14)		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: TOOMEY, PATRICK JOSEPH, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: PA	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">2549493.70</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">7993.70</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <i>Wolfson, Howard, , ,</i>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div> 06 / 23 / 2017	
[Electronically Filed]			

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Independence USA PAC	FEC IDENTIFICATION NUMBER ▼ C C00532705
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee Revolution Media Group LLC <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 03 / 2016	
Mailing Address 1020 Princess Street			Amount 18206.00	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.5317	
Purpose of Expenditure Television advertisement production - 'Guns Internet' (see amended 48-hour report filed August 14)		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 10 / 2016	
Name of Federal Candidate: TOOMEY, PATRICK JOSEPH, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President State: PA	
Calendar Year-To-Date Per Election for Office Sought 2567699.70			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Revolution Media Group LLC <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 12 / 2016	
Mailing Address 1020 Princess Street			Amount 23565.61	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.5284	
Purpose of Expenditure Television and digital advertisement production - 'Newtown'		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 12 / 2016	
Name of Federal Candidate: TOOMEY, PATRICK JOSEPH, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President State: PA	
Calendar Year-To-Date Per Election for Office Sought 2567699.70			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	41771.61
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Wolfson, Howard, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 06 / 23 / 2017

Signature

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NAME OF COMMITTEE (In Full) Independence USA PAC		FEC IDENTIFICATION NUMBER ▼ C C00532705	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <input type="text" value="MM/DD/YYYY"/>	

Full Name of Payee Revolution Media Group LLC <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text" value="MM/DD/YYYY"/> 08 / 12 / 2016	
Mailing Address 1020 Princess Street		Amount <input type="text" value="9646.21"/>	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.5625 Date of Disbursement or Obligation <input type="text" value="MM/DD/YYYY"/> 08 / 12 / 2016
Purpose of Expenditure Television and digital advertisement production - 'Newtown'		Category/Type 004	
Name of Federal Candidate: TOOMEY, PATRICK JOSEPH, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought <input type="text" value="2567699.70"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Revolution Media Group LLC <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text" value="MM/DD/YYYY"/> 08 / 22 / 2016	
Mailing Address 1020 Princess Street		Amount <input type="text" value="365000.00"/>	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.5190 Date of Disbursement or Obligation <input type="text" value="MM/DD/YYYY"/> 08 / 17 / 2016
Purpose of Expenditure Television and digital media buy		Category/Type 004	
Name of Federal Candidate: TOOMEY, PATRICK JOSEPH, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought <input type="text" value="2932699.70"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text" value="365000.00"/>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text" value=""/>
(c) TOTAL Independent Expenditures	<input type="text" value=""/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

 Signature

 [Electronically Filed]

Date 06 / 23 / 2017

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NAME OF COMMITTEE (In Full) Independence USA PAC		FEC IDENTIFICATION NUMBER ▼ C C00532705	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Revolution Media Group LLC <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 12 / 2016	
Mailing Address 1020 Princess Street		Amount 0.00	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.5097
Purpose of Expenditure Television and digital advertisement media buys - 'Newtown'		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 08 / 19 / 2016
Name of Federal Candidate: TOOMEY, PATRICK JOSEPH, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►	
2932699.70 2932699.70			
Full Name of Payee SKDKnickerbocker <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 10 / 2016	
Mailing Address 1150 18th Street NW Suite 800		Amount 468938.01	
City Washington	State DC	Zip Code 20036	Transaction ID : SE.5055
Purpose of Expenditure TV Ad Buy and Production		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 08 / 09 / 2016
Name of Federal Candidate: DEMINGS, VAL, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►	
468938.01 468938.01			
(a) SUBTOTAL of Itemized Independent Expenditures		468938.01	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature Wolfson, Howard, , ,		Date MM / DD / YYYY 06 / 23 / 2017	
[Electronically Filed]			

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ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Independence USA PAC				FEC IDENTIFICATION NUMBER ▼ C C00532705	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee SKDKnickerbocker			<input type="checkbox"/> Memo Item		
Mailing Address 1150 18th Street NW Suite 800			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 19 / 2016		
City Washington	State DC	Zip Code 20036	Amount 9712.20		
Purpose of Expenditure Television and digital advertisement production - 'Promise'		Category/Type 004	Transaction ID : SE.5174 Date of Disbursement or Obligation MM / DD / YYYY 08 / 18 / 2016		
Name of Federal Candidate: AYOTTE, KELLY A, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: NH <input type="checkbox"/> President		
Calendar Year-To-Date Per Election for Office Sought			9712.20 Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee SKDKnickerbocker			<input type="checkbox"/> Memo Item		
Mailing Address 1150 18th Street NW Suite 800			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 19 / 2016		
City Washington	State DC	Zip Code 20036	Amount 32550.00		
Purpose of Expenditure Digital media ad buy - 'Promise'		Category/Type 004	Transaction ID : SE.5175 Date of Disbursement or Obligation MM / DD / YYYY 08 / 18 / 2016		
Name of Federal Candidate: AYOTTE, KELLY A, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: NH <input type="checkbox"/> President		
Calendar Year-To-Date Per Election for Office Sought			42262.20 Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			42262.20		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Wolfson, Howard, , , Signature		[Electronically Filed]		Date MM / DD / YYYY 06 / 23 / 2017	

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ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Independence USA PAC				FEC IDENTIFICATION NUMBER ▼ C C00532705	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee SKDKnickerbocker			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 19 / 2016		
Mailing Address 1150 18th Street NW Suite 800			Amount 746664.45		
City Washington		State DC	Zip Code 20036		Transaction ID : SE.5176
Purpose of Expenditure Television media buy - 'Promise'			Category/ Type 004		Date of Disbursement or Obligation MM / DD / YYYY 08 / 18 / 2016
Name of Federal Candidate: AYOTTE, KELLY A, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: NH <input type="checkbox"/> President		
Calendar Year-To-Date Per Election for Office Sought 788926.65			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee SKDKnickerbocker			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 19 / 2016		
Mailing Address 1150 18th Street NW Suite 800			Amount 9712.20		
City Washington		State DC	Zip Code 20036		Transaction ID : SE.5183
Purpose of Expenditure Television and digital advertisement production - 'Promise'			Category/ Type 004		Date of Disbursement or Obligation MM / DD / YYYY 08 / 18 / 2016
Name of Federal Candidate: TRUMP, DONALD J., , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: State:		
Calendar Year-To-Date Per Election for Office Sought 9712.20			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			756376.65		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Wolfson, Howard, , ,		[Electronically Filed]		Date MM / DD / YYYY 06 / 23 / 2017	

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ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Independence USA PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00532705 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on MM / DD / YYYY

Full Name of Payee <input type="checkbox"/> Memo Item SKDKnickerbocker			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>08 / 19 / 2016</div> </div>	
Mailing Address 1150 18th Street NW Suite 800			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">32550.00</div>	
City Washington	State DC	Zip Code 20036		
Purpose of Expenditure Digital media ad buy - 'Promise'		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : SE.5184 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>08 / 18 / 2016</div> </div>	
Name of Federal Candidate: <input type="checkbox"/> Support TRUMP, DONALD J., , , <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">42262.20</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item SKDKnickerbocker			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>08 / 19 / 2016</div> </div>	
Mailing Address 1150 18th Street NW Suite 800			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">746664.45</div>	
City Washington	State DC	Zip Code 20036		
Purpose of Expenditure Television media buy - 'Promise'		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : SE.5185 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>08 / 18 / 2016</div> </div>	
Name of Federal Candidate: <input type="checkbox"/> Support TRUMP, DONALD J., , , <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">788926.65</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	779214.45
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Wolfson, Howard, , ,

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Date

MM / DD / YYYY

06 / 23 / 2017

Signature

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ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Independence USA PAC				FEC IDENTIFICATION NUMBER ▼ C C00532705	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee SKDKnickerbocker			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 23 / 2016
Mailing Address 1150 18th Street NW Suite 800			Amount 69703.50		Transaction ID : SE.5621 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 23 / 2016
City Washington	State DC	Zip Code 20036			
Purpose of Expenditure Television media buy		Category/Type 004			
Name of Federal Candidate: DEMINGS, VALDEZ 'VAL', , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>10</u> State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought 468938.01			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y
Mailing Address			Amount 		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
City	State	Zip Code			
Purpose of Expenditure		Category/Type 			
Name of Federal Candidate:			<input type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought 			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> 0.00 </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> (b) SUBTOTAL of Unitemized Independent Expenditures..... </div> <div style="width: 35%; text-align: right;"> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> (c) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> 3987056.62 </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Wolfson, Howard, , , Signature			[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 23 / 2017